U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended realture to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only Aw222000 READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT.	
1. File Number U - 1042 3	2. Fiscal Year Covered From:	
	1 / 1 / 2004 Through: 12 / 31 / 2004	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name Ernest W Johnson	Name Painter Local Union #118 Labor Organization File Number 003159	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 84/9 Windwood C+	Street 4204 South Brook Street	
City Louisuille	City Louisville	
State ZIP Code + 4 402/9	State ZIP Code + 4 40214	
5. Position in labor organization. Business Rep		
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is active:y seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	7.b. Amount.	
Street		
City		
State ZIP Code + 4		
Signature		
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed List W John	On 8-/3-05 502 969 · 2295 Date Telephone Number	

Name of Person Filing

Ernest W Johnson

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization or with a trust in which your labor organization is interested.			
Name and address of Business (including trade name, if any).	9. Business deals with		
Name	a. Labor Organization	;	
Trade Name, if any:	b. Trust		
P.O. Box, Bldg., Room No., if any	c. Employer		
Street			
City			
	11.a. Nature of such dealing.		
Name Indiana St. Council of Roofers	Christmas Gift		
	Gift Certificate		
Trade Name, if any:	(Heavenly Ham)		
P.O. Box, Bidg., Room No., if any POBOA 5769		}	
Special company of the company of th	11.b. Approximate dollar value of such dealing.	\$ 25.00	
City La fayette State IN. ZIP Code + 4 47903	12.a. Nature of interest held or income received.	,	
5769			
<u> </u>	12.b. Amount.		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:		ļ	
P.O. Box, Bldg., Room No., if any			
Street		4 m	
City	1		
State ZIP Code + 4 '			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		



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INDIANA

PLU # 47 - INDIANAPOLIS 317-546-5638

PLU #80 - LAFAYETTE 765-477-7848

PLU #156 - EVANSVILLE 812-425-4414

PLU #197 - TERRE HAUTE 812-232-1644

PLU #460 - NW INDIANA 219-947-0420

PLU #469 - FORT WAYNE 260-484-7924

PLU #669 - ANDERSON 765-378-5242

PLU #1118 - SOUTH BEND 574-287-8200

GLU #1165 - IN, KY, IL

EVANSVILLE 812-962-0652

FORT WAYNE 260-484-7924

GARY 219-947-0420

Indianapolis 317-542-7617

South Bend 574-287-8200

KENTUCKY

PLU # 118 - Louisville 502-366-2233

PLU # 500 - PADUCAH 270-441-7697

TENNESSEE

PGLU # 456 - NASHVILLE 615-255-7863

121

August 15, 2005

U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards 200 Constitution Avenue, NW, Room N-5616 Washington, DC 20210

RE: Form LM-30 (1/1/04 - 12/31/04)

To Whom It May Concern:

The transactions, dealings and interests that are detailed in the attached Form LM-30 represent my good faith effort to reconstruct the reportable occurrences for the period of January 1, 2004 to December 31, 2004. I am a first-time filer and was unaware of the filing requirements until recently; some items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will immediately file an amended Form LM-30.

Sincerely yours,

Ernest W. Johnson

Business Representative/Organizer

Painters Local Union 118/District Council 91

CERTIFIED MAIL # 7000 0520 0016 4449 6035

An Affiliate of District Counc I 91
409 Millner Industrial Drive • Evansville, Indiana 47710
PHONE: 812-962-9191 • FAX: 812-425-4890